



U.S. Department
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Fact Sheet

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VA Programs for Homeless Veterans

The United States (U.S.) Department of Veterans Affairs (VA) remains committed the goal of preventing and ending homelessness. We can and will get there.

No one agency or group can end Veteran homelessness alone. The effort to prevent and end Veteran homelessness is a partnership of Federal, State, local government and most importantly the local community. VA works with communities to help them develop the solutions that work best for them and their Veterans.

VA and our federal, state, and local partners, as well as non-governmental partners, recognize that ending Veteran homelessness is not a single event in time; rather, it is a deliberate effort made to achieve the goal, and continued follow-up efforts to make sure that progress toward achieving the goal is maintained.

Our goal is a systemic end to homelessness, which means communities across the country:

- Have identified all Veterans experiencing homelessness.
- Are able to provide shelter immediately to any Veteran experiencing unsheltered homelessness who wants housing.
- Provide service-intensive transitional housing in limited instances.
- Have the capacity to help Veterans swiftly move into permanent housing.
- Have resources, plans, and systems in place should any Veteran become homeless or be at risk of homelessness in the future.

The ultimate goal is to make sure that every Veteran has permanent, sustainable housing with access to high-quality health care and other supportive services and that Veteran homelessness in the future is prevented whenever possible or is otherwise rare, brief, and nonrecurring.

State of Homelessness

Significant progress has been made to prevent and end Veteran homelessness. The number of Veterans experiencing homelessness in the United States has declined by nearly half since 2010. The U.S. Department of Housing and Urban Development (HUD) Point-in-Time (PIT) Count estimates that on a single night in January 2019, 37,085 Veterans were experiencing homelessness, which is 2.1 percent fewer compared to 37,878 reported in January 2018.

Since 2010, more than 800,000 Veterans and their family members have been permanently housed, rapidly rehoused, or prevented from falling into homelessness

through HUD's targeted housing vouchers and VA's homelessness programs.

In addition to the national snapshot provided by the 2019 PIT Count, as of December 4, 2019, 81 communities — which includes three states — have effectively ended Veteran homelessness, based on criteria established by VA, HUD, and the U.S. Interagency Council on Homelessness (USICH). To see a full and current list of communities that have achieved an effective end to Veteran homelessness based on these guidelines, go to www.va.gov/HOMELESS/endingVetshomelessness.asp.

This progress illustrates what can be achieved when government agencies partner with citizens and community leaders to tailor the delivery of services in manner that meets the needs and expectations of the community.

Preventing and Ending Veteran Homelessness Is Possible

To achieve this goal, we need continued leadership, collaboration, commitment and a sense of urgency from communities across the country. No one entity can prevent and end homelessness among Veterans.

There has been unprecedented support from every branch of government as well as from state and local leaders and agencies to provide both the funding and human resources needed to end Veteran homelessness. Communities continue to align those resources with the most effective practices, including Housing First, to ensure rapid, safe and stable housing for Veterans who need it.

Progress comes when community leaders implement proven practices that are reducing homelessness among Veterans nationwide and ending it community by community. Practices developed and implemented locally that are common among communities that have achieved an effective end to Veteran homelessness include:

- Use Housing First practices and approaches across every aspect of services for homeless Veterans. Essential to success, Housing First is a proven model that increases the chance that a Veteran will be housed and decreases emergency room costs for Veterans. It is a humane, dignified way to help Veterans achieve the stable, permanent housing they deserve.
- Identify all homeless Veterans by name and share a list of those names across systems so that no one is forgotten.
- Use and share data to find and serve every Veteran who needs homeless services.
- Create coordinated assessment and entry systems to make sure there is no wrong door for Veterans seeking help — coordinate people and services at every level to create integrated systems of care.
- Set concrete and aspirational monthly and quarterly goals and engage the community and associated systems to meet them. This requires the direct involvement of community leaders and focused political will. Also, benchmark progress against specific criteria.

- Synchronize programs to coordinate outreach and target the right type of resource to the right Veteran at the right time.
- Make sure outreach and engagement efforts are coordinated across service providers, law enforcement personnel, prisons and jails, hospitals, libraries, and job centers to proactively seek out Veterans in need of assistance with housing.
- Focus on creating connections from homeless services, housing organizations, and VA medical centers (VAMCs) to workforce investment boards and employers so that Veterans can be quickly connected to jobs.

Veterans Health Administration Homeless Programs

All data on this fact sheet are as of the end of Fiscal Year (FY) 2019 (September 30, 2019) unless otherwise stated. (Data for some programs are reported only by calendar year.)

Community Resource and Referral Centers (CRRCs): CRRCs are a collaborative effort of VA, communities, service providers, and agency partners. Centers are located in strategically selected areas to provide both a refuge from the streets and a central location to engage homeless Veterans in services. When Veterans enter these centers, they are referred to physical and mental health care resources, job development programs, housing options, and other VA and non-VA benefits.

Program highlights, FY 2019:

- There were over 73,000 visits to CRRCs.

For more information, please visit: www.va.gov/homeless/crrc-list.asp .

Domiciliary Care for Homeless Veterans (DCHV): The DCHV program provides time-limited residential treatment to homeless Veterans with mental health and substance use disorders, co-occurring medical concerns, and psychosocial needs such as homelessness and unemployment.

Program highlights, FY 2019:

- The DCHV program provided services to over 6,900 Veterans.
- The DCHV program offered more than 2,000 operational beds at 44 sites in support of homeless Veterans.

Female Veterans Served By DCHV:

- Over 500 or 7 percent received DCHV services.

For more information, please visit www.va.gov/homeless/dchv.asp.

Health Care for Homeless Veterans (HCHV): The central goal of the HCHV program is to reduce homelessness among Veterans by connecting homeless Veterans with health care and other needed services. This program provides outreach, case management, and HCHV Contract Residential Services (CRS), ensuring that chronically homeless Veterans especially those with serious mental health diagnoses and/or substance use disorders can

be placed in VA or community-based programs that provide quality housing and services that meet their specialized needs.

Program highlights, FY 2019:

- Over 6,300 Veterans exited HCHV CRS programs to permanent housing. The average length of stay in a HCHV CRS program is 68 days. 64 percent of Veterans exiting CRS programs engage in VA mental health services and 80 percent receive ongoing VA medical services.
- HCHV supported 320 Stand Downs providing outreach to over 75,500 Veterans.
- HCHV provided outreach services to over 137,000 total Veterans.
- HCHV provided case management services to over 10,750 Veterans.

Female Veterans Served By HCHV:

- Over 750 or 5 percent received HCHV CRS/Safe Haven (SH) services.
- Over 980 or 9 percent received HCHV CM services.
- Over 16,100 or 12 percent received HCHV outreach.

For more information, please visit www.va.gov/homeless/hchv.asp.

Health Care for Reentry Veterans (HCRV): The HCRV program is designed to address the needs of incarcerated Veterans when it comes to re-entering their community. The goals of HCRV are to prevent homelessness; reduce the impact of medical, psychiatric, and substance use problems on community readjustment; and decrease the likelihood of re-incarceration for those leaving prison.

Program highlights, FY 2019:

- The HCRV program served over 9,100 Veterans.

Female Veterans Served By HCRV:

- Over 240 or 3 percent received HCRV services.

For more information, please visit www.va.gov/homeless/reentry.asp.

Homeless Patient Aligned Care Teams (H-PACTs): H-PACTs provide a coordinated “medical home” tailored to homeless Veterans’ needs. At selected VA facilities, Veterans are assigned to an H-PACT that includes a primary care provider, nurse, social worker, homeless program staff, and others who offer medical care, case management, housing assistance, and social services. The H-PACT provides and coordinates the health care that Veterans may need while helping them obtain and stay in permanent housing.

Program highlights, FY 2019:

- Nationally over 17,600 homeless and at-risk Veterans are actively enrolled in the H-PACT model of care; about 22,000 were served annually.
- There are 80 H-PACT teams and providers operating at 54 VAMCs, Community Based Outpatient Clinics (CBOC), and Community Resource & Referral Centers (CRRC) across the country.
- H-PACT program demonstrates substantial reductions in emergency

department visits and hospitalizations.

- The H-PACT team model of care facilitates accelerated placement into permanent housing. Veterans in H-PACTs were housed in permanent housing 81 days faster than those not enrolled in an H-PACT.
- H-PACT care more effectively engages Veterans in ambulatory care.
- The average H-PACT patient cost approximately \$9,379/year less to care for compared to a homeless Veteran enrolled in a PACT, driven largely by fewer hospitalization in VA and the community.
- After six months of care within an H-PACT, Veterans show a 19 percent reduction in Emergency Department use and a 35 percent reduction in inpatient hospitalizations.
- Enrollment in an H-PACT results in significantly higher patient satisfaction, reversing previously negative interactions with VA primary care.
- H-PACT patients are more likely than PACT patients to report positive experiences with access, communication, office staff, and their providers.

Female Veterans Served By H-PACT:

- Over 900 or 5 percent received H-PACT services.

For more information, please visit www.va.gov/homeless/h_pact.asp.

Homeless Providers Grant and Per Diem (GPD): The GPD program allows VA to award grants to community-based agencies to create transitional housing programs and offer per diem payments. The purpose of the program is to promote the development and provision of supportive housing and/or related services — with the goal of helping homeless Veterans achieve residential stability, increase their skill levels and/or income, and obtain greater self-determination. GPD-funded projects offer communities a way to help homeless Veterans by providing housing and other services and at the same time assist VAMCs by augmenting or supplementing care.

Program highlights, FY 2019:

- VA's largest transitional housing program with over 12,700 beds nationwide.
- 23,300 Veterans entered GPD transitional housing.
- Over 29,600 Veterans were served by GPD grants.
- Over 13,400 homeless Veterans exited GPD to permanent housing.
- Average length-of-stay in GPD: 156days (*lowest since 2008*).
- VA announced approximately \$30 million to fund 128 new case management grant awards to community organizations.
- VA announced approximately \$2.4 million to fund 11 renewal special need grant awards to community organizations.
- GPD exercised the option year for 614 renewal grants to community organizations to provide 11,813 transitional housing beds and 16 service centers for homeless Veterans during FY 2020.
- GPD continues to support 29 Transition In Place grants providing 583 beds.

Female Veterans Served By GPD:

- Over 1,800 or 6 percent received services through GPD grant awards.

For more information, please visit <http://www.va.gov/homeless/gpd.asp>.

Homeless Veterans Dental Program (HVDP): HVDP helps increase the accessibility of quality dental care to homeless and certain other Veteran patients enrolled in VA-sponsored and VA partnership homeless rehabilitation programs.

Program highlights, FY 2019:

- Approximately 17,000 Veterans were provided dental care through HVDP.
- The HVDP marks a milestone this year of having served over 220,000 Veterans since its inception 12 years ago.

For more information, please visit www.va.gov/homeless/dental.asp.

Homeless Veterans Community Employment Services (HVCES): HVCES is authorized by 38 U.S. Code § 2031 and 2033. To help improve employment outcomes for homeless Veterans, in 2019 VA continued to support the Vocational Development Specialists who are embedded in homeless program teams and serve as Employment Specialists and Community Employment Coordinators (CEC). HVCES staff ensure that a range of employment services are accessible to Veterans who have experienced homelessness, including chronically homeless Veterans, complement existing medical center-based employment services, and are a bridge to employment opportunities and resources in the local community.

Program highlights, FY 2019:

- Employment outcomes for homeless Veterans continued to trend in an upward direction, exceeding the national targets.
- Over 9,300 Veterans exited homeless residential programs with competitive employment (GPD, Compensated Work Therapy/Transitional Residence (CWT/TR), DCHV, Low-Demand Supportive Housing (LDSH), and HCHV – Contract Residential Services (HCHV-CERS)).
- Employment rates for Veterans housed through Housing & Urban Development-VA Supportive Housing (HUD-VASH) exceeded the national target by 5 percent.
- VA announced its collaboration with federal partners, the U.S. Department of Labor (DOL) and the USICH to support the expansion of the DOL Homeless Veterans' Reintegration Program (HVRP) Program grants. HVRP grants in excess of \$48 million were awarded to 149 community organizations, serving more Veterans than ever before.

For more information, please visit www.va.gov/homeless/employment_programs.asp.

Housing and Urban Development – Veterans Affairs Supportive Housing (HUD-VASH): Through this collaborative program between the U.S. Department of Housing and Urban Development and VA, HUD provides eligible homeless Veterans with a Housing Choice rental voucher, and VA provides case management and supportive services so that Veterans can gain housing stability and recover from physical and mental health problems, substance use disorders, and other issues contributing to or resulting from homelessness. HUD-VASH subscribes to the principles of the Housing First model of care. Housing First is an evidence-based practice model demonstrating that rapidly

moving individuals into housing, and then wrapping supportive services around them as needed, helps homeless individuals exit homelessness and achieve housing stability, improving their ability and motivation to engage in treatment. The program goals are to help Veterans and their families gain stable housing while promoting full recovery and independence in their community.

Program highlights, FY 2019:

- Vouchers active: 90,749
- Vouchers in use: 83,684
 - Veterans housed: 77,802
 - Vouchers issued to Veterans seeking housing: 4,667
 - Vouchers reserved for Veterans undergoing PHA Validation: 1,215
- Active vouchers available: 7,065

For more information, please visit www.va.gov/homeless/hud-vash.asp.

National Call Center for Homeless Veterans (NCCHV): The NCCHV — which can be reached at 1-877-4AID VET (1-877-424-3838) — was founded to ensure that homeless Veterans and Veterans at risk of becoming homeless have free, 24/7 access to VA staff. The hotline is intended to assist homeless and at-risk Veterans and their families; VAMCs; Federal, state, and local partners; community agencies; service providers; and others in the community.

Program highlights, FY 2019:

- The NCCHV received over 121,800 total actionable contacts.
- Responders at the NCCHV made over 63,300 referrals to the VAMC point of contact.

For more information, please visit:

<https://www.va.gov/HOMELESS/NationalCallCenter.asp>

National Center on Homelessness among Veterans (NCHAV): The Center is established by section 713 of the Jeff Miller and Richard Blumenthal Health Care and Benefits Improvement Act of 2016. The Center works to promote recovery-oriented care for Veterans who are homeless or at-risk for homelessness by conducting and supporting research; assessing the effectiveness of programs; identifying and disseminating best practices and integrating these practices into policies, programs, and services for homeless or at-risk Veterans; and serving as a resource center for all research and training activities carried out by the Department and by other Federal and non-Federal entities with respect to Veteran homelessness. The Center is active in research, model development, education and policy analysis.

Program highlights, FY 2019:

- Expanded our pool of affiliated researchers from 22 to 36. Through these partnerships, the Center provides a forum for researchers focused on the causes of homelessness to network and discuss opportunities to partner on research projects.

- Generated 30 peer-reviewed research publications on homeless Veterans and 10 research briefs.
- Organized and sponsored the VA Health Services Research and Development Service (HSR&D), SOTA (state of the art) event on Homelessness and Suicide.
- Presented 25 research-focused educational events to various stakeholder groups across the country which included research to practice webinars, special presentations and research roundtable events.
- Sponsored a special issue of the Journal Medical Care on “Multimorbidity in Homeless Populations” which is expected to be released in FY 2020.
- Initiated 19 studies covering a range of topics from epidemiology of homeless Veterans, employment, predictive analytics, rapid rehousing, dementia, financial literacy, and suicide.
- Our homeless certificate program went live in September 2019 which will offer VA staff and those VA staff in all homeless programs nationally (over 4,500 employees) providing care to Veterans experiencing homelessness an opportunity to obtain a certificate that demonstrates competency in working with homeless populations.
- Provided clinicians with training on evidence-based psychotherapies. Specifically, we trained 14 homeless program clinicians who treat Veterans experiencing homelessness and two training consultants in Cognitive Based Therapy for Homeless (CBT-H) Veterans and are currently pursuing a train-the-trainer program in that network. Future plans include soliciting other networks for similar training opportunities.
- Provided twelve national educational webinars that were attended by over 3500 participants. Topics included Ethics, Working with Veterans Required to Register as Sexual Offenders; Behavior Management; Opioids in Rural America; Traumatic Stress and Organizational Dynamics; Race and Homelessness: Principles of Leadership in the Community; Evidence-Based Practices; Mooney Management for Veterans; Whole Health Approaches; Military Culture.

For more information, please visit: www.va.gov/homeless/nchav/index.asp .

Office of Analytics and Operational Intelligence (OAOL): OAOL's mission is to provide visibility and insights into homeless program operations, with the goal of improving program performance, strategic management, and operational efficiency. OAOL leads and provides consultative support around the development of strategies, data collection platforms, tools, and initiatives that support data-driven, enterprise-wide decisions and actions. The team also provides intensive guidance, consultation and support to internal stakeholders at all levels of the organization (VISN, VAMC, Program Offices and leadership) and external stakeholders, including community and federal partners. Additionally, this team is responsible for national evaluation efforts, homeless program performance measurement, technical assistance and operational analysis focused on improving homeless program service delivery, targeting, expedited access to services and homeless program sustainment.

Program highlights, FY 2019:

- The Homeless Operations, Management, and Evaluation System (HOMES) Support Team provided technical assistance and support to homeless program

- staff to address approximately 12,000 inquiries to the HOMES Help Desk.
- The Current Program Census Report, which is used to monitor services for Veterans currently engaged in Homeless Programs, had over 109,000 views by homeless program staff.
- The Homeless Programs Hub, which contains a collection of operational tools and resources to support homeless program staff, received approximately 28,000 views.

For more information, please email: VHA10NC1HPOAnalyticsTeam@va.gov

Project CHALENG (Community Homelessness Assessment, Local Education and Networking Groups): This project brings together consumers, providers, advocates, local officials, and other concerned citizens to identify the needs of homeless Veterans and work to meet those needs through planning and cooperative action. Local CHALENG meetings represent important opportunities for VA and public and private agency representatives to meet and develop meaningful partnerships to better serve homeless Veterans.

Program highlights, calendar year 2018:
(CHALENG data for calendar year 2019 will be available in spring 2020).

- In 2018, 3,950 individuals completed a CHALENG Participant survey. This included 2,229 homeless Veterans and 1,721 non-homeless Veterans (VA staff, state and public officials, community leaders, volunteers).
- Twelve percent of the homeless Veteran survey participants were women. Forty-seven percent of all homeless Veteran participants were between the ages of 45-60 with another 32 percent 61 or older. Fifty-one percent were non-White; nine percent identified their ethnicity as Hispanic/Latino.
- There were 1,721 provider and other stakeholder participants. Of these, 46 percent were VA staff, two percent were other Federal employees, 34 percent were state/local official or community providers, and 18 percent were interested members of the community.
- Eight of the top ten unmet needs were the same for male and female Veterans: child care, credit counseling, discharge upgrade, family reconciliation assistance, financial guardianship, housing for registered sex offenders, and legal assistance in two categories: child support and to prevent eviction/foreclosure. Two needs that were in the top ten unmet for male Veterans (but no female Veterans) were legal assistance to help restore a driver's license and legal assistance for outstanding warrants and fines. Conversely, dental care and drop in center/day program were on the female Veterans' top ten unmet list, but not on the male Veterans' top ten unmet needs list.
- Eight of the top ten met needs were also the same for male and female Veterans: medical services, testing and treatment in three separate areas (TB, Hepatitis C, HIV/AIDS), case management, services for emotional or psychiatric problems, clothing, and health and wellness. Two needs that were in the top ten met for male Veterans (but not female Veterans) were personal hygiene and medication management. Conversely, substance abuse treatment and clothing were on the female Veterans' top ten met list only.

- Consistency across time: for male Veterans, nine of the top ten unmet needs were the same in 2017 and 2018. Eight of the top ten unmet needs for female Veterans were also the same.
- Similarly, six and nine of the top ten met needs for male and female Veterans respectively were the same between 2017 and 2018.
- Consistent with 2017 data and with the previous 18 years of CHALENG data, met needs primarily reflect services that Veterans Health Administration (VHA) can provide directly, and unmet needs are primarily services that require community partnership to meet. This consistency underscores the importance of collaboration between federal, state, local, and community partners to meet the needs of homeless Veterans to successfully end homelessness.

For more information about the project and to see the full details of the top ten unmet needs for Veterans, and the demographics of the participants, please visit www.va.gov/homeless/challeng.asp.

Stand Downs: Stand Downs are typically one- to three-day events providing services to homeless Veterans such as food, shelter, clothing, health screenings, VA and Social Security benefits counseling, and referrals to a variety of other necessary services, including housing, employment, and substance use treatment. Stand Downs are collaborative events, coordinated among local VA sites, other government agencies, and community groups that serve people who are homeless.

To see Stand Down program highlights, go back to the HCHV program section on page 3.

For more information, please visit www.va.gov/homeless/events.asp.

Supportive Services for Veteran Families (SSVF): This program, authorized by Public Law 110-387, provides supportive services to very low-income Veteran families living in or transitioning to permanent housing. SSVF is designed to rapidly rehouse homeless Veteran families and prevent homelessness for those at imminent risk of becoming homeless due to a housing crisis. Funds are granted to private nonprofit organizations and consumer cooperatives, which then provide very low-income Veteran families with a range of supportive services designed to promote housing stability.

Program highlights, FY 2019:

- SSVF assisted over 105,100 individuals; with over 70,500 Veterans assisted.
- Over 20,600 children assisted in over 10,500 households with children.
- Of the Veterans assisted, over 9,400 or roughly 13 percent, were female.
- 82 percent of those discharged from the SSVF program obtained permanent housing.
- VA announced \$426M in grants under the SSVF Program. The grants were awarded to 271 nonprofit organizations in all 50 states, the District of Columbia, Guam, Puerto Rico and the U.S. Virgin Islands. The grants will support outreach, case management and other flexible assistance to rapidly re-house Veterans who become homeless or prevent Veterans from becoming homeless.
- On August 28, 2019, VA published an amended final rule that allows SSVF to offer Shallow Subsidies in target communities characterized by high rates of

homelessness and low availability of affordable housing. SSVF has made \$50M available to 10 target communities to support this initiative. Key characteristics of the Shallow Subsidy is that it offers a fixed rental subsidy of up to 35 percent of the Fair Market Rent, as published by HUD, for 2 years.

- SSVF, in partnership with HUD and USICH, has implemented the Rapid Resolution initiative. Rapid Resolution seeks to use mediation techniques and modest financial support to reunify imminently at-risk or homeless Veterans with family or friends as an alternative to entering the homeless system. SSVF is sponsoring training on mediation techniques throughout the country to support SSVF grantees and VA staff in implementation of Rapid Resolution.

Female Veterans Served By SSVF:

- Over 9,400 or 13 percent received SSVF services.

For more information, please visit www.va.gov/homeless/ssvf.asp.

Veterans Justice Outreach (VJO): The purpose of the VJO program is to prevent homelessness and avoid the unnecessary criminalization of mental illness and extended incarceration among Veterans. This is accomplished by ensuring that eligible justice-involved Veterans encountered by police, and in jails or courts, have timely access to VHA mental health, substance use, and homeless services when clinically indicated, and other VA services and benefits as appropriate.

Program highlights, FY 2019:

- The VJO program provided services to over 49,800 justice-involved Veterans.
- VA provided support to 508 Veterans Treatment Courts and other Veteran-focused court programs.
- VA partnered with legal providers to offer 170 pro-bono legal clinics to Veterans on site at VAMCs.

Female Veterans Served By VJO:

- Over 3,400 or 7 percent received VJO services.

For more information, please visit www.va.gov/homeless/vjo.asp.

Contact Us and Additional Information

To find the VA facility nearest you, please visit <http://www1.va.gov/directory/guide/home.asp>.

More details on all of VA's programs for homeless Veterans are available at www.va.gov/homeless.

If you are at risk of becoming homeless — or know a Veteran who is — contact VA's National Call Center for Homeless Veterans at 1-877-4AID VET (1-877-424-3838) to speak to a trained VA responder.